CHIROPRACTIC PRACTICE RIGHTS COALITION

NEWSLETTER

VOLUME I, NUMBER 8 APRIL, 1984

WILLIAM C. MEYER
1905 - 1984

We dedicate this issue of the CPRC Newsletter to the memory of our friend and colleague, Dr. Bill. We hereby celebrate his life and mourn his death.

Recently, when Dr. Bill was honored by his CCA Society as Doctor of the Year, he wrote and told of many of his experiences in the chiropractic profession in California. As a tribute to Bill, we present here what he remembered.
When Dr. Bill arrived in California 40 years ago:

The ACE Club, dedicated to promoting the profession of Chiropractic, disbanded to lend its support in the reorganization of the CCA. The purpose of the newly reorganized CCA was to represent the entire chiropractic profession and to offer to the public the broad general practice of chiropractic authorized under the law.
Representing the various philosophies of Chiropractic were leaders such as: Drs. Gordon Goodfellow, Clyde Knouf, L.E.Montenegro, Duane Smith, George Taylor, J.C.Tobin and Homer York etc. whose purpose was to protect the lawful practice of all the members of the profession.

When Dr. Ray Lieser was CCA Pres., legislative recognition of chiropractors under Workman's Comp.(now Workers' Comp.) was accomplished.
Later the State Bd. of Chiropractic Examiners and the CCA increased undergraduate college hours to 4 years. Following this, the profession added the requirement of two years of pre-professional education. Bill commented that the number of hours required for a D.C. license equals the legal requirement for an M.D. license.

When Dr. Thor Halsteen was CCA Pres., both houses of the legislature - through the efforts of the CMA sent legislation to the desk of Governor Warren to withdraw the rights of D.Cs. to use Xray for diagnosis. The Governor refused to sign such a bill.
Dr. Bill also recalled that - a year or so later the CMA had a bill introduced proposing that, if any group of M.Ds. believed that a D.C. was exceeding his practice, they could get an injunction and padlock the D.Cs' office. The CCA did not stop this bill and it reached the Governor's desk. He chose to amend the bill to the effect that at least 12 M.Ds. would need to sign any complaint and post a bond along with the complaint. Bill said that the measure has not been heard of since.

In the late 40s, the Southern California College of Chiropractic (formerly the College of Chiropractic Physicians) amalgamated with the Los Angeles College of Chiropractic. Southern Cal. was a non-profit institution through which the profession raised funds to purchase LACC from Dr. Wilma Churchill who was its owner at that time. As a part of the purchase agreement, the amalgamated colleges were to be known as the Los Angeles College of Chiropractic (a professionally owned, non-profit, college).

As Bill recalled - Dr. Nugent, Dir. of Ed. of the NCA, was sent to California to support the amalgamation which was brought about through the efforts of: Drs. Linnie Cale, Cliff Eacrett, Gordon Goodfellow, Frank Hamilton, Pat Lackey, Ralph Martin, Otis McMurtrey, L.E.Montenegro, James Nicholson, Keith Woodard etc.

Prior to the amalgamation, the So. Cal. College had embarked on a Graduate School program developing the numerous specialties within the chiropractic profession i.e., Cardiology, EENT, Proctology, Psychiatry, OB & Gyn etc. Delegates from each of these societies formed the House of Delegates, under the auspices of the CCA, for the purpose of Specialty Certification.

Dr. Bill was especially enthused about this program and was certified in several specialties.
George TAylor was Ch. of the House of Delegates,vice Ch. was L.E.Montenegro and Lee Norcross was the Dean of the Graduate School.

In the early 50s, the Pure Food and Drug confiscated ultrasound instruments from chiropractic offices. Dr. Bill remembered that his instrument, when confiscated, was paid for by the FDA agents because it hadn't been uncrated. The FDA won a case against Chiros in the Federal Court. The loss of this case was directly attributed to the Atty. for the CCA who tried to placate and not offend the FDA. (cont. next pge.)

As Bill said, L.E.Montenegro was elected CCA Pres. for the purpose of appealing the case with attorneys who would fight for chiropractic practice rights. (Hildreth & Van Dyke)
The appeal to the Ninth Circuit Federal Court was won and the right to use ultrasound by chiropractors was retained. Unfortunately, many of the confiscated instruments were not returned by the FDA to the Drs. who owned them.

In the late 50s the CCA seemed to drift to a position of trying to placate the Medics to avoid harassment. There was a movement to unionize chiropractors in order to protect practice rights. Dr. Bill became active in this effort. As a matter of fact, he was the first Pres. of the local union in the Citrus District.
Mr. Meany, head of the AFL, CIO, did not agree that unions should represent professional people and Dr. Bill and others then formed the International Chiropractic Union - this union was short lived.

This was a time of strong efforts to protect legal practice rights and to diminish and narrow them.

At a professional meeting in the 50s, as Bill recalled, Dr. Frank Hamilton reported that the Medics and the D.A. were planning a 'chiropractic bloodbath' and that about 20 doctors were going to be prosecuted. Dr. Bill called 10 D.Cs. together, each of whom contributed $100 toward a defense fund.

The first D.C. to be prosecuted after this formation of CREES was John Jeffries. He gave the organization its name - CREES - after the CREE Indians.

CHIROPRACTIC RESEARCH EDUCATION AND ETHICS SOCIETY.

Dr. Bill wrote that "Crees had 400 members contributing to our defense fund and we had malpractice insurance when the CCA did not. Drs. Meadows and Loyst asked me to drop the insurance, which I did influence my directors to do, so that the CCA could provide M.I."
It was never Dr. Bill's intenetion to have another organization competitive to the CCA. It was only when the CCA did not protect practice rights that he became actively engaged in whatever it took to protect the lawful practice rights of chiropractors.

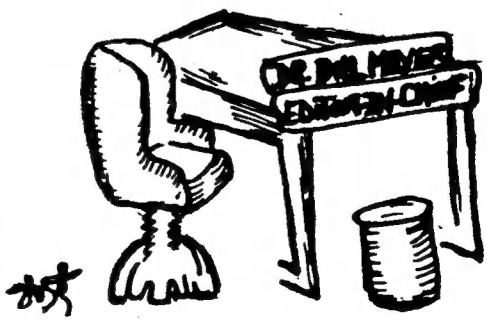
Some of the Drs. involved in CREES with Bill were: Drs. Jeffries, Montenegro, Ricks, Schultz and Williamson. Phil Jacks was Exec. Dir. and Sadye Jacks was Sec.
Any Crees member who was arrested for alledgedly practicing medicine without a license had access to a bailbond 24 hrs. a day anywhere in California. Customarily arrests of this nature were made late in the day, generally on a Friday when it is difficult to reach a lawyer. As a consequence, Drs. so charged would spend the night in jail, and, sometimes the weekend. Crees' members were protected from this indignity.

Dr. Bill's dedication to the protection of practice rights might have been due to his having been arrested twice - once in New York for practicing medicine (giving an adjustment) and once in California on false charges which were dismissed after 11 months of harassment.

Through the years Dr. Bill continued to actively participate to protect practice rights. Recently, when the State Board was considering (because of the persuasion of the O.A.G.) to rule that colonics were not part of chiropractic practice - Bill was there to protest and remind the Board that this system of treating was very much a part of chiropractic practice.
As the pressure on the profession to give up traditional facets of practice has grown in the last few years, and, as the CCA has gone along with this philosophy, and, as the various colleges have relaxed their standards, Bill with some others formed a loosely knit coalition to call a halt, once more, to the denigration of his beloved profession.

Dr. Bill has served as the Editor of the CPRC Newsletter which has attempted to acquaint the profession with dangerous attempts to curtail chiropractic rights and to remind the profession as to what the legal and lawful practice of chiropractic is in California.
Bill believed in the best and most complete education for both under and post graduate. He desired the acceptance of the D.C. as a Primary Health Provider and the legal recognition as a Chiropractic Physician.

BILL - THE CPRC PLEDGES TO CONTINUE YOUR QUEST.



We're doing it for you, Bill

CHRONOLOGY OF CHIROPRACTIC IN CALIFORNIA

(Save for future reference for you and your attorney)

1895 Sept. 18th, Dr.D.D.Palmer made a "thrust" on the neck of a patient, using the spinous process as a lever and restored the patient's hearing. Dr. Palmer developed the skill of adjusting by using the spinous and transverse processes for leverage.

1910 A textbook, "The Science, Art and Philosophy of Chiropractic" was published by D.D.Palmer. The following are quotes from this book:

".. I am not the first person to replace subluxated vertebrae, for this art has been practiced for thousands of years.(Dr. Palmer developed a technique i.e., 'the Chiropractic Adjustment', pge. 11).
"The basic principle of the science and philosophy (not the art) of Chiropractic is tone.."(pge.659).
"Tone is defined as: 'Normal tension of nerves, muscles or an organ. The basic principle of Chiropractic"
"Tone is the foundation upon which, as a basic principle, I built my science. From tone originates all the principles which constitute the science and philosophy of Chiropractic."
"Tone is the product of elasticity and renitency."
"In biology it is the condition resulting from elastic force acting against an impulse." (pge. 971).
"Obstetrics is the art of midwifery. It has to do with pregnancy, childbirth and the puerpium. A Chiropractor should be able to care for any condition which may arise in the families under his care, the same as a physician.." (pge. 789).

During the first two decades of this century, in California, it was illegal for a person to practice chiropractic without a license from the Medical Board.

1913 The California Legislature amended the Medical Practice Act to authorize the practice of medicine and surgery, and, a second certificate to authorize the practice of drugless medicine.

Chiropractic is defined as a drugless system of treating chiefly by manipulation by the Office of the Attorney General. In the 1913 edition of the STandard Dictionary, chiropractic is defined as "A drugless method of treating diseases chiefly by manipulation of the spinal column."

1915 People v. Chong (chiropractors etc.) (28 Cal App 121, 151 Pac 553, 86 A.L.R. at pge. 623). The Court distinguished between certificates, "both of which authorized the treatment of diseases, injuries and deformities". It said that "physicians may prescribe and use drugs and may sever and penetrate with a knife the tissues of human beings...." Drugless Practitioners "may not prescribe or use drugs nor operate with a knife and in that way sever or penetrate the tissues of human beings except...they may sever the umbilical cord."

1916 The California Supreme Court in the Jordan (172 Cal 391) and Ratledge (154 Pac 455) cases said that a chiropractor must meet the educational requirements for, and be licensed as, a Drugless Practitioner by the Medical Board. The Court held that it was illegal to practice chiropractic without a certificate from the Medical Board.

1922 The Chiropractic Initiative Act was adopted by the people of California. This amendment to the Medical Practice Act transferred the regulation of the drugless practice of medicine authorized to chiropractors from the Medical Practice Act to the newly created Chiropractic Board.

A coalition of the various schools of chiropractic, naturopaths and drugless practitioners agreed to the wording of Sec. 7 of the ACT. The wording was intended as a protection from discrimination against any particular school of chiropractic, and, in addition thereto, allowed for the use of drugless, natural and naturopathic procedures. (Sec. 16 Chiropractic Act.)

1924 Following the effective date of the Chiropractic Act in 1923, the directory published by the California Board of Medical Examiners stated that Drs. of Chiropractic could continue practicing as Drugless Practitioners but could no longer call themselves Chiropractors without a license granted under the newly created Chiropractic Act. It also stated that graduates from Chiropractic Colleges could continue to be candates for licenses as Drugless Practitoners.

cont.

1924 The California Supreme Court, **in La** Barre (193 Cal 388), said that Sections 5 through 10 of the Chiropractic Act had to do with the license to practice and that the drugless practice authorized prior to 1922 was the legal practice of chiropractic extant into the Chiropractic Act. The Court held the Chiropractic License superior to the Drugless Practitioner's Certificate.

1932 People v. Schuster (122 Cal App (Supp) 790) (10 Pac 2d 204) Court held that a licensed Dr. of Chiropractic could not be held in violation of the Medical Practice Act when the Medical Practice Act is in conflict with the practice authorized by the Chiropractic Act.

Court held that Sec. 18 of the Chiropractic Act repeals the Medical Practice Act where it is in conflict with the Chiropractic Act.

The Court further held that the Chiropractic Act is an Initiative Act and has paramount authority over the Medical Practice Act.

1935 Evans v. McGranahan (4 Cal App 2d 202) (41 P 2d 937) Court held that a licensed chiropractor has authority to practice chiropractic as taught in chiropractic schools, regardless of whether such practice would, prior to the enactment of the Chiropractic Act, have been construed as practice of medicine, surgery, osteopathy, dentristry or optometry, and also, includes the use of necessary mechanical, hygienic and sanitary measures incident to the care of the body.

1938 Fowler (32 C.A. 2d Supp. 737) "The provision of Sec. 7 of the Chiropractic Act, that a licensee thereunder is authorized 'to use all necessary mechanical and hygienic and sanitary measures incident to the care of the body', is not a definition of, but an addition to chiropractic as used in the previous part of that section, and authorizes the use of measures which would not otherwise be within the scope of that license..."
The Fowler Court defined the word chiropractic as a "drugless method of treatment especially by manipulation of the spine". It also took judicial notice of several other definitions used by various chiropractic schools or colleges.

1939 Purviance v Brockman *

1940 Gaylord (CR A 1723) Court held that a chiropractor, under his license, could perform acts forbidden under the Medical Practice Act.
The Court also held a chiropractor, under his license, may lawfully make a diagnosis.
The Court stated the Chiropractic Initiative Act is not an exemption to any law "it is in fact and effect the repeal of all laws in conflict with it.

1944 Gage v Jordan (23 C 2d 794) Court ruled "All doubt as to the construction of pertinent provisions relating to an initiative mesure is to be resolved in its favor, and such legislation is to be given the same liberal construction as that afforded election statutes generally."

Court also held "Where the language of a constitutional or statutory provision is susceptible of more than one meaning, it is the duty of the courts to accept that intended by the framers of the legislation, so far as such intent can be ascertained."

Court said "Where the language of a constitutional or a statutory provision is fairly susceptible of two constructions, one of which, in application, will render it reasonable and fair and harmonious with its manifest purpose, and another which would be productive of absurd consequences, the former construction will be adopted."

King v Bd. of Medical Examiners (65 C.A. 2d 644) Court held that the penetration of tissue for the purpose of diagnosis was not in violation of the Medical Practice Act.
The Court took judicial notice that a Chiropractic College in San Francisco taught venipuncture for the purpose of diagnosis, and that penetration of the tissue for the purpose of diagnosis was not treatment, and was proper as a diagnostic procedure.
The Court held that the study of a subject mandated by law for certification could have had no other purpose than to enable students to make such tests in connection with diagnosis of patients in the event that the students were admitted to practice.

cont.

1948 The Voters' Guide, Nov. 2nd., contained arguments for and against Prop. 16 to amend the Chiropractic Act. Ratified by the voters, it increased the educational requirement for a chiropractic license to 4000 hours. On pges. 14 & 15, in the Argument in favor, is stated "Experience seems to indicate that raising the educational standards...certainly affords greater protection to the public by assuring a higher minimum standard of technical training of those practicing in this brand of the healing arts." It was the increase in technology and the number of technical subjects required by Sec. 5 of the ACT that was opposed by the "straight schools" of chiropractic. Two doctors of chiropractic wrote the arguments against Prop. 16, stating that chiropractic subjects were changed to medical subjects, and that chiropractors would be practicing in the fields of medicine, surgery, and/or obstetrics. The voters ratified Prop. 16.

1949 Drugless Practitioners' Section 2138 was repealed from the Medical Practice Act.(In view of the 1948 changes in the Chiropractic Act, there was no further need for the Drugless Practitioners' Certificate.)

1952 Oosterveen Case (112 CA 2d 201). The Court of Appeals, in Oosterveen, stated that Chiropractors may practice natural medicine or use naturopathic methods which the Court identified and listed. **

1963 In Crees (213 CA 195) at page. 216, the Court stated that it was not an unconscionable burden for a chiropractor to show that he falls within the exception to the charge of practcing medicine without a license. He can do this by simply offering in evidence a copy of the Official Directory of the Board of Chiropractic Examiners.

Sec. 1001 B&P Code mandates the Bd. of Examiners to issue an annual directory with a list of names of holders of "unforfeited and unrevoked certificates to practice chiropractic, and whose certificate in any manner authorizes the treatment of human beings for diseases, injuries, deformities, or any other physical or mental condition".

The Crees Court held that the practice of chiropractic as taught in chiropractic schools or colleges is proper - it is not up to the schools to determine what is to be taught as chiropractic.

The Court, also, said that chiropractors are denied the use of drugs, surgery, and medical obstetrics.

The Bowland Case (1981, 556 P 2d 1081) has clarified the Crees Case in relation to the practice of normal childbirth procedures, i.e., The Crees case only prohibits the medical and surgical practice of obstetrics to chiropractors but not the drugless and natural procedures.
The Crees Court took judicial notice that the California Legislature had adopted Sec. 13, General Provisions, Div. 2, B&P Code after the Trial Court Hearing but before the Crees Appeal and would, therefore, not rule on the Statute.
Sec. 13 exempted drugs listed in Secs. 4052 & 4057 Pharmacy Act B&P Code from the term Materia Medica as used in any initiative act. Therefore, chiropractors may use the exempted drugs.

The Appellate Court, in Crees, limited its consideration to Sec. 7 of the ACT ignoring all other sections and laws even though the term Materia Medica is in Sec. 7 of the Chiropractic Act.

1970 Amendment to Sec. 6(c) of the Chiropractic Act. The word <u>practical</u> was added so that the section now reads: "Examinations shall be written, oral, and practical, covering chiropractic as taught in chiropractic schools and colleges designed to ascertain the fitness of the applicant to practice Chiropractic. Said examination shall include at least each of the subjects as set forth in Sec. 5 hereof..." (Secs. 4(g), 5 and 6(c) are harmonized with Sec. 7).

1972 In 1972, when the Legislature added radiological technology, safety and interpretation as part of the practice of chiropractic practice, it was added as a mandatory subject in the curriculum (Sec. 5). There was no doubt in the minds of the legislators that the words "as taught in chiropractic schools and colleges" referred specifically to Sec. 5 and Sec. 6(c) of the ACT. The legislative purpose and intent are clearly stated by the Assemblymen who wrote the Argument in favor of adopting the Amendment referred to as Prop. 11 on the 1972 Ballot.

1978 Chiropractic Accrediting Agencies, to receive California aproval, must meet the minimum educational schedule set forth in Sec. 5 and the Board's rules.

cont.

The Act does not set at large what a Chiropractic college may teach as the scope of Chiropractic.

1981 The Bowland Court (556 P 2d 1081) held that when there are two reasonable constructions to a statute the defendant is entitled to the construction most favorable to him.
The Court also said that all sections of a statute are to be harmonized.
The Supreme Court defined the care of pregnancy as the treatment of a physical condition and said that it was illegal to treat a "physical condition" without a license to do so. (Sec. 1001 B&P Code states that Chiropractors are authorized to treat "physical conditions".)

1983 Cabral (141 Cal App 3d 1481). The Court stated "it is necessary to analyze the distinction between the practice of chiropractic and the practice of medicine".
"It is apparent that the distinction between fields of medicine and chiropractic is based not on the type of ailment or disease from which the patient suffers but on the techniques and methods of treatment employed."
"The State of California, however, has licensed the practice of chiropractic, and a practitioner in the field is no more a guarantor of success than a medical doctor."
"In the absence of fraud, bad faith or a patent invasion of the field of medicine by a chiropractor, it seems to us that a criminal trial is not the proper forum for determining the validity of the theory of chiropractic."

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This brief chronology of important events in the legal and legislative history of Chiropractic in California leads to the present Chiropractic Initiative Act.

Statutory definitions and Case Law interpretations establish the practice of Chiropractic authorized to the holder of a chiropractic license in CAlifornia.

A person holding a valid, unrevoked license to practice chiropractic in the state of California is authorized to practice any mode or system of chiropractic as taught in chiropractic schools or colleges as mandated by and set forth in Sec. 5 of the ACT. In addition to the practice of chiropractic, the holder of a license may use mechanical, hygienic and sanitary measures incident to the care of the body.

SUMMARY

Any person holding a valid, unrevoked or unsuspended license issued by the California Board of Chiropractic Examiners is authorized to practice any mode or system of Chiropractic and may use physiological, natural and/or naturopathic methods and procedures. And, may diagnose, treat, operate for or prescribe for any ailment, blemish, deformity, disease, disfigurement, disorder, injury, or other physical or mental condition of any person without the use of drugs included in Materia Medica and without severing or penetrating human tissues by operating with a knife with the exception of severing the umbilical cord.

LEM. 4/84.

* Purviance v Brockman, Amador County Superior Court 4284, 1939. Court held that it is manifestly evident that those things mentioned in the Drugless Practitioners Certificate as not being the practice of medicine under the Medical Act, then they are not the practice of medicine under the Chiropractic Act. Court also held that physiotherapy belongs to chiropractors as a prior arts right.

** "Naturopathy is a mode of healing that attempts to restore and maintain health by the use of light, air, water, clay, heat, rest, diet, herbs, electricity, massage, Swedish movements, suggestive therapeutics, chiropractic, magnetism, physical and mental culture, and does not advocate the use of drugs and medicines but does advocate the use of 'dietary supplements' which said dietary supplements include all substances found in nature, including those substances found in herbs, the earth and animal tissues, whether raw or refined."

WANTED BY CPRC NEWSLETTER: Old pamphlets, brochures, articles, books, class descriptions, certificates, legal opinions by the State Board, chiropractic colleges or other organizations that might be helpful in defending chiropractic practice rights.

THE FLUOROSCOPE

Look for
a case to be filed against the Medical Quality Assurance Board, in San Diego, to protect the right of Chiropractors to use colonic therapy.
Don't look for
the present Chiropractic Board to back down on this issue as the 1980 Bd. did. This Board will defend colonic therapy as a chiropractic practice.
Look for
more lay people, trained in bureaucracy and indoctrinated toward allopathic medicine, to be hired for key positions in chiropractic institutions.
Don't look for
these people to understand, or, represent chiropractic as an alternative and competitive practice to allopathic medicine.
Look for
medical opposition to chiropractic to come from satellite groups composed of the allied medical professions.
Don't look for
these satellite groups to accept the scientific principles and philosophy of chiropractic.
Look for
'turncoats' in the chiropractic profession to try to 'medicalize' the chiropractic profession.
Don't look for
the 'turncoats' to defend chiropractic principles and practices against the 'lay experts' who have been hired by chiropractic institutions to gain medical approval.
Look for
the 'enforcement arm' of the State Bd. to seek professional cooperation to discover persons practicing 'chiropractic adjustments' without a license.
Don't look for
the 'enforcement arm' of the Bd. to let up on its 'monitoring program' of restricting drugless and naturopathic procedures by chiropractic licensees.
Look for
interns on California Chiropractic campuses to praise their academic education while expressing dissatisfaction with their clinical and practical training.
Don't look for
the promotional promises made for student recruitment to be forgotten. Some student gripes may turn into law suits against colleges for fraud.
Look for
the Peer Review Group to have legislation introduced to circumvent the federal law which allows individual group members to be sued for wrongdoing.
Don't look for
this legislation to improve chiropractic insurance payments. Reasons given for this type of legislation is that the insurance companies want it.
Look for
naturopaths, who hold California D.C. licenses, to expect any state chiropractic association to protect drugless and natural practice rights to the full extent of the existing Chiropractic Act as authorized by case law. (Oosterveen)
Don't look for
apathy from the naturopathic group - they will no longer be put off by the 'good old boys' saying this is not the time for protective action.
Look for
hospitals who have empty beds to welcome the entry of chiropractic patients.
Don't look for
the Chiropractor to be fully accepted as the 'treating' doctor.

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FABLE

This is a story about four people named - EVERYBODY, SOMEBODY, ANYBODY, and NOBODY. There was an important job to be done and EVERYBODY was sure that SOMEBODY would do it. ANYBODY could have done it, but NOBODY did it. SOMEBODY got angry about that, because it was EVERYBODY'S job. EVERYBODY thought ANYBODY could do it, but NOBODY realized that EVERYBODY wouldn't do it, it ended up that EVERYBODY blamed SOMEBODY when NOBODY did what ANYBODY could have.

(author unknown)

NO, WE HAVE NO ADVERTISERS. WE NEED YOUR CONTRIBUTIONS TO CPRC SO WE MAY CONTINUE DR. MEYER'S CRUSADE TO DEFEND CHIROPRACTIC PRACTICE RIGHTS.

TO CPRC NEWSLETTER
P.O. BOX 11794
Venice, California 90291-8860

Yes, you can count on me to help.

I am enclosing $_____.

Name_____

Address_____

To Selected San Francisco Chiropractic Physicians

The struggle to survive is a continuing one. That is why we belong to our local, state and national organizations. These organizations are only as good as an informed and participating membership make them.

In California we have an attempt to reduce our practice rights. Our 1922 Act was passed only after much personal sacrifice by many dedicated chiropractic physicians. We can not permit our rights to be eroded because once started it becomes difficult to stop.

It has been many years since I last engaged in the practice of obstetrics and I do not contemplate ever resuming. Most physicians are not interested in this natural chiropractic phenomenon. But if only one DC wants to practice or even if none are interested now, we who are practicing have the obligation to protect this right for future physicians.

Our State Board has decided obstetrics is the practice of medicine. Even though the Board is made up of chiropractic physicians and our law includes obstetrics, the Board has turned against its own. This is disgraceful and why I am contributing to Dr. Laura Flores' defense. Of greater significance is the concern that colleagues of this caliber will next declare ultrasound or Xray the practice of medicine.

CCA has been noticeably quiet and one must be apprehensive. Vigilance is essential on the part of all of us. Write your Board and the CCA. Let them know you expect responsibility and adherence to the law.

Yours in chiropractic,

Bill Nelson

William A. Nelson, D.C., FICC

ED: Dr. Nelson's letter is most appropriate. We believe it needs to be directed to every chiropractic doctor in the State of California.

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CHIROPRACTIC PRACTICE RIGHTS COALITION NEWSLETTER

VOLUME I, NUMBER 9 JUNE, 1984

TRADEOFFS?

The following letter was written by Dr. Wm. Meyer to the CCA President, 4 years ago:

April 30, 1980

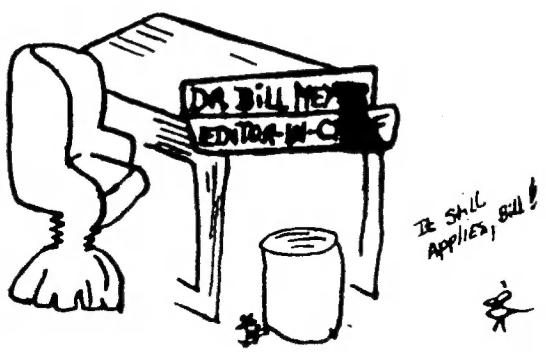
Dear Mr. President and Directors:
Dr. Gentry recently visited the Ventura County Chiropractic Society. He made an eloquent appeal for membership and gave an effectice account of the legislative prowess made by the CCA. He told us of some of the proposals the CCA may implement in order to make Chiropractic more acceptable to the CMA and the Atty. General in California for the privilege of using Ultra Sound Therapy.

Dr. Gentry's account of the accomplishments and goals of the CCA were heart warming and laudable. The profession is fortunate to be in such good hands.

Near the end of Dr. Gentry's talk he mentioned a possible trade off of some of the modalities such as Colonic Lavage, Obstetrics and other rights we have been fighting hard to keep for many years. Services selectively used for the benefit of the public as long as I can remember. He implied that by trading off these rights we might beget the love, cooperation and acceptance of the establishment.

These are glorious times for Chiropractic and are filled with great opportunity. We are better accepted by the public. The Governor has smiled upon us, waved his hand generously in appointing ten Chiropractors to the Medical Board of Review.

Also the Governor has appointed Dr. Ronald Lawrence M.D. to sit with the Chiropractic Board. There could be no better choice from my experience. Does this set a precedent for a succeeding Governor to appoint an M.D. who may be less sympathetic?



In my 50 years experience and observation of the CMA, AMA, Atty. Generals and the establishmentarian Courts in this and other states, I have learned from bitter experience (Fowler: Crees Cases) that these "Honorable Bodies" will never accede to any degree of acceptance of Chiropractic, Osteopathy or any competitive philosophy or profession which differs from its own. This was proven by the Osteopathic Surrender and Infamous tradeoff for an M.D. certificate for 60 Shekels. The fine Osteopathic Medical School for 1 Shekel. I saw no noticeable acceptance from the Host Profession. Homeopathic Medicine, Eclectic Medicine, Physical Medicine, and the Drugless Healing license and schools all went into oblivion in the same way.

Thanks to a few courageous men like Dr. Richard Eby who fought in the courts, got the D.O. license reinstated by costly legal action. Osteopathic Medicine which has always been a friend to the Chiropractic profession was saved and its school is now functioning in Pomona-Cal.

Chiropractic in the State of California did not attain its present position by love, tolerance and cooperation with the CMA or Goliath Medicine. The history of the extinction of other professions has been documented. The only evidence of love, tolerance and cooperation bestowed upon all is annihilation. A dead emasculated Chiropractic profession would be an object of Love.

Let us forget about the acceptance of the CMA and the Atty. General. He must be the protector of the establishment's economic interests. We must let the cultists in our own profession flagelate themselves into a ridiculous position of limited responsibility to the public. We must keeppressing on for greater latitude of service and achievements in the future for the public good.

We can soar to great professional heights of increased public service by guarding against mediocrity, short cuts in our offices, quackery and the advertisement of psuedo-sciences which may open us up to scientific criticism unless used for stated experimental purposes. Courageously we must fight for more rights and privileges to serve, surrendering nothing which is rightfully ours.

The members of the CCA will militantly oppose any "trade-offs". If any are made you can look for a rup-

ture in our ranks and a weakening of many of the gains the CCA has already made. Political Medicine has profited from our divisiveness in the past. We do not need any more "Quislings" to sell us out or make compromises with the avowed enemy.

"We are in earnest, we shall not retreat a single inch and we will be heard."

Sincerely yours,
Wm. C. Meyer D.C.

As Dr. Meyer said, appeasement by the CCA of the Medics has no value for chiropractic. The position paper on Chiropractic prepared by the California Council Against Health Fraud, Inc.(Dynamic Chiropractor,March 1984) shows where chiropractic appeasement of the medics can lead.

* * * *

STATE BOARD PERVERTS LAW

One can't help but wonder whether or not the actions of the non-chiropractors in the Chiropractic State Board office are wilfully aimed at the destruction of the profession in this State.

Many recent accusations have been overturned by the various Administrative Law judges. The false charges against Dr. Clarence Blosat and Dr. Donald Jones are two of the more recent examples.

Under the California Administrative Code, a Board is given broad powers but with certain restraints. "The Administrative procedure Act was intended to prevent the arbitrary removal of licensure...(Title 2, section 11126)

The Dr.Blosat Accusation is a case in point. Dr. Blosat was charged with a violation of Rule 317(d) "Unprofessional Conduct...excessive treatment, etc." This rule has been preverted by the Board's Executive Director to the point of excess. By referring to B&P Code sec. 725, the true meaning of "excessive treatment" can be easily determined. It does not involve a set number of treatments; which premise reveals either ignorance or willful maliciousness.

Dr. Jones' accusation involved diagnosis of a systemic condition! Since the non-chiropractor who determines Board policy is completely ignorant of the gamut of Chiropractic care philosophy, he unilaterally decided this was the practice of medicine.

To the non-chiropractors in the State Board office, any treatment other than neck and back is the practice of medicine. One might suggest they read the Cabral Decision in which the Appeals Court Judge Lynn Compton reminded the Courts that Doctors of Chiropractic and Doctors of Medicine treat the same conditions using different methods.

Other areas of surprising ignorance expressed by the non-chiropractors in the Board's office is revealed, rather starkly, in the recent "Board of Examiners' Update 1984." On a front page "Chairman's Message," it was stated that monies for the function of the Board come from "public Funds." Anyone

Anyone with the ability to read has but to examine section 14 of the Chiropractic Act entitled "Chiropractic Examiner's Fund" to see that the funds for the Board come from the chiropractors themselves.

This same Chairman , when the suggestion was made to change rule 317,replied "That is up to the State Legislature." Section 4(b) of the Chiropractic Act clearly mandates that the formation of rules and regulations are part of the powers exercised by the Board.

The sooner the non-chiropractors are eliminated from the Board's office, the sooner the attempt to destroy the profession will itself be destroyed; And the ongoing perverting of the Chiropractic Act will stop.

* * * *

ONCE AGAIN.

At a meeting of the Cancer Advisory Council of the state Dept. of Health Services, health professionals decried a problem about which they are powerless to do anything.

Richard Dees, investigator with the F.D.A., said San Diego is particularly hard hit because it is so close to the Mexican border.

Cited as "bogus remedies" were coffee enemas, special diets, minerals and vitamins, herb and spice 'cures'.

California laws are aimed at false advertising and fraudulent claims. Because spices, herbs, vitamins, coffee enemas, of themselves, do not make claims they are not branded by law as being fraudulent.

Is this another attempt by the allopaths to put vitamins, nutrition, herbs, etc. under prescription?

* * * *

Memo from the Board of Chiropractic Examiners

by Garret F. Cuneo
Executive Secretary

QUESTIONNAIRE RESULTS

Sometime ago you all received a questionnaire from the State Board and were asked to complete and return it to that office by September 30th. Following are the results of that questionnaire. The State Board's purpose was to accumulate accurate information concerning the present state of the art, and the results will be useful for long-range planning for the profession and to assess the profession's changing needs.

Total Number of Questionnaires Mailed: 4,670

Total Number of Questionnaires Returned: 2,715 (58%)

1. I practice:
   Full-time 2,279
   Part-time 381
   Other (retired) 55
2. Do you believe that a chiropractor must examine each patient and arrive at a diagnosis?
   Yes 2,332 (87.18%)
   No 343 (12.8%)
3. If your answer to No. 2 is no, do you believe a chiropractor's only role in determining the condition of a patient is to analyze subluxations?
   Yes 301
   No 305
4. Do you take X-rays for purposes of:
   Structural analysis? (only)
   Yes 301
   No 0
   Diagnosis? (only)
   Yes 190 (7%)
   No 0
   Both?
   Yes 2,225 (81.96%)
   No 0
   Do you feel X-ray interpretation is a necessary part of your practice?
   Yes 2,428 (89.47%)
   No 286 (10.54%)
5. Has any private or hospital lab (radiological or clinical) refused to accept your referrals for patient examination?
   Yes 687 (26%)
   No 1,926 (73.7%)
6. Do you believe a chiropractor should limit his or her adjustments to the spinal column?
   Yes 181 (6.67%)
   No 2,534 (93.34%)
7. Do you believe a chiropractor should be permitted to adjust not only the spinal column, but also extremities (such as knees and shoulders) and cranial sutures?
   Yes 2,595 (95.58%)
   No 120 (4.59%)
8. a. Although the chiropractic adjustment is a primary method of treatment, do you additionally feel that other treatment measures are required to facilitate the patient's recovery?
   Yes 2,407 (90.9%)
   No 240 (9.07%)
   b. Please check those following items which you routinely utilize in your practice:
   1. Physical Therapy – 2,104 (77.5%)
   2. Colonics – 263 (9.69%)
   3. Nutritional Counseling and Supplementation – 2,291 (84.3%)
   4. Patient Counseling – 2,092 (77.6%)
   5. Mechanical, Hygienic and Sanitary Measures, such as Supportive Orthopedic Appliances, Corrective and Orthopedic Gymnastics – 2,208 (81.3%)
9. If your response to question No. 8a. was yes, check those treatment modalities which you presently utilize:
   1. Ultrasound – 1,992 (73.3%)
   2. Diathermy – 1,319 (48.59%)
   3. Infrared – 816 (30.06%)
   4. Ultraviolet – 553 (20.37%)
   5. Traction – 1,367 (50.53%)
   6. Low Voltage Electrotherapy (i.e., Galvanic, Fradaric, Sinusoidal) – 1,323 (48.7%)
10. Do you feel that physical therapy procedures are a necessary component of your overall treatment of those conditions which you may routinely encounter in practice?
    Yes 1,977 (72.8%)
    No 736 (27.13%)
11. Do you feel it would be helpful for you to additionally have the opportunity to refer patients to a registered physical therapist?
    Yes 1,167 (45.04%)
    No 1,424 (54.96%)
12. Do you provide your patients with any of the following (please check):
    1. Nutritional Supplements, Vitamins, Minerals, etc.? – 2,288 (84.28%)
    2. Nutritional Counseling, Diets, etc.? – 2,106 (77.57%)
    3. Orthotic appliances, Braces, Supports, etc.? – 1,439 (53.01%)
    4. Heel/Sole lifts? – 1,678 (68.81%)
13. At present a chiropractor may utilize procedures outlined in questions 8, 9, and 12 by successfully passing all sections of the State Board Examination. In the future, do you feel a chiropractor should be prohibited from using those procedures unless he or she obtains a separate license or certification for each procedure?
    Yes 335 (12.46%)
    No 2,354 (87.55%)
14. Do you believe a chiropractor should be permitted to assist in the birth of a child using natural birthing methods?
    Yes 1,928 (72.1%)
    No 746 (27.9%)
    Do you provide this service?
    Yes 80 (2.96%)
    No 2,624 (97.05%)

This Memo appeared in the Dec.1980 CCA Journal. As Mr. Cuneo stated - the purpose of the questionnaire was to assist with long range planning for the profession and to assess the profession's changing needs.

The questionnaire covers the broad practice of chiropractic under the present law and the responses show the profession's support.

The profession rejected the notion of dividing practice into several certificates to practice.

Over 70% of the respondents considered subjects now required to be taught in chiropractic schools or colleges, under the existing law, were necessary to their practice, i.e., physiotherapy, nutrition, O.B., mechanical, hygienic and sanitary measures etc.

The existing law meets the requirements for the Chiropractic Physician to be a Primary Health Provider.

As stated by Mr. Cuneo, it can be used as the basis for long range planning.

CORRECTION

Re. Chronology in April 1984 CPRC Newsletter.

Correct citation for Ratledge Case 1916 - (156 Pac 455)

The U.S. Supreme Court let stand the Seventh Circuit Court of Appeals decision that the Wilks et al vs. A.M.A. et al case is to be retried.

Last year, the C.M.A. Resolution for the elimination of the chiropractic profession in California was exposed in Health Freedom News (May 1983).

The first official act of the California Council Against Health Fraud, Inc. (self styled consumer protection organization) was to publish a position paper against chiropractic.

All of the above actions, and more, taken by the medics are a smoke screen to obscure their true position By attacking the chiropractic profession and claiming to be protectors of public health, they divert attention away from their own failures. In this way they give the impression of being the 'white knight shining armor' with the only knowledge to successfully accomplish 'cures'. They say, "anything else is quackery".

Dr. A. Earl Homewood has written an 'Open Letter' in reply to the CCAHF position paper (Dynamic Chiropractor, May 1984).
Dr. Homewood cites numerous authors, statistics and failures as well as the unscientific approach to health and well being used by the allopaths. This scholarly paper deserves careful reading to better understand the difference between Chiropractic Medicine and Allopathic Medicine.

The attack from the outside requires vigilance on the part of the chiropractic profession regardless of the various schools of chiropractic. There is room for all "Schools of Chiropractic" to 'practice as taught'. To exist as a profession, we must all work together.

The attack from the outside is formidable. We must, first, rid ourselves of those within the profession who are turncoats, and then, support each other as doctors of chiropractic under a license embracing the full practice of chiropractic as P.H.Ps.

The Medics have manipulated the different schools of chiropractic to take adversary positions against each other. Remember the old saying - DIVIDE AND CONQUER?

LET'S NOT LET IT HAPPEN TO US.

* * * * * * * * * * * * * *

CPRC NEWSLETTER NEEDS YOUR HELP.
SEND IN YOUR CONTRIBUTION TODAY
SO WE CAN CONTINUE OUR FIGHT
FOR CHIROPRACTIC PRACTICE RIGHTS.

* * *

TURNCOATS

A 'Turncoat' to the Chiropractic profession is:

1) a lay person or D.C. who professes to work for the benefit of the chiropractic profession and says "to get along we must go along with the allopaths" i.e., giving up practice rights.
2) a lay person or D.C. who believe that a 'real' doctor is an M.D. while professing to believe that D.C.s are 'treating doctors'.
3) a D.C. whose self esteem is so low and his confidence in the chiropractic practice of drugless medicine is so slight that he thinks Chiropractors should be spinal manipulators for back problems only.
4) a D.C. who believes that spinal manipulation for back problems should be a branch of allopathic medicine.
5) a lay person, working for the chiropractic profession, or a D.C. who believe that chiropractic should not be an alternate general health system choice for the consumer.
6) a lay person, ostensibly promoting chiropractic, or a D.C. who wish to deny doctors of chiropractic from assuming full responsibility as family doctors.
7) a D.C. whose 'broad' view is to dictate a singular mode of practice to the entire profession. (divide and conquer).

TURNCOAT - n. one who switches to an opposing side or party: Traitor. (Webster's New Collegiate Dictionary. 1981)

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DOES HISTORY REPEAT ITSELF?

Several years ago the state associations and the State Board were taken over by turncoats.

WHAT DID THEY TRY TO ACCOMPLISH?

1) AB 868 which was destined to eliminate most chiropractic practice rights mandated by law.
2) Appeasement of allopathic medicine by adopting A.G.Opinion 79-825 to eliminate assisting in natural childbirthing for a fee.
3) Establishment of Peer Review Groups to act as an arm of insurance companies to deny payment for services of D.C.s.
4) Changing policy and regulation from requiring high standards of education in laboratory and clinical training in all required subjects for the protection of patient consumers to a policy of 'enforcement' viewing the licensed doctor as a criminal from whom the consumer needs protection.
5) A totalitarian system within associations and agencies denying democratic rights of the individual doctor.

6) The same thaing that was accomplished within the Osteopathic profession in California i.e., Dr. Henley from U.S.C., whose degree was not in Osteopathy, was brought in to head the college of Osteopathic Physicians and Surgeons. The D.O. 'turncoats' started a legislative effort similar to AB 868. Their legislation amended the Osteopathic Initiative Act and also allowed the transfer of their licenses to the Medical Board. The Osteopathic College changed its name to the California College of Medicine - granting M.D. degrees to those D.O.s transferring their license to the Medical Bd.. This ended the existence of the Osteopathic College and placed the Osteopathic Board in limbo.

IS HISTORY REPEATING ITSELF?

* * *

THE FLUORSCOPE

Look for
'Totalitarians' in the U.S. to use what are known as communistic tactics to dispose of dissidents by charging 'mental illness'.
Don't look for
any changes from the communistic technique of discrediting dissidents through character assasination.
Look for
the allopaths (AMA) to attempt greater control over broadcast health info from other sources.
Don't look for
easy access to the media for other health professionals to speak of treatments alternative to conventional medical treatment.
Look for
continuing attempts to control all information on nutrition by the American Dietetics Ass'n.
Don't look for
the A.D.A. (or the A.M.A.) to be content with anything less than state legislation to require A.D.A. membership in order to use the term 'registered nutritionist'.
Look for
revival of attacks against 'charlatans and quacks' by so-called consumer groups in the interest of public health.
Don't look for
anything to escape the charge of quackery that is outside the concept of allopathic medicine.
Look for
an increased reporting of iatrogenic disease.
Don't look for
reduction of this condition with the increase in the marketing of toxic drugs as the acceptable, regular practice of medicine.
Look for
high risk and dangerous modalities to be accepted as 'regular, orthodox care' to reduce insurance malpractice losses.
Don't look for
this to aid the consumer, but rather, to make it more difficult to get large awards for damages.
Look for
Lay persons and D.C.s who believe that Chiropractic Medicine is an alternative to Allopathic Medicine.
Don't look for
Lay persons and D.C.s to represent you who believe that Chiropractic is a limited profession, treating muscles and joints.

CHIROPRACTIC PRACTICE RIGHTS COALITION
POST OFFICE BOX 11794
VENICE, CALIFORNIA 90291-8860

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P.O. Box 14487
So. Lake Tahoe,Ca95702

CHIROPRACTIC PRACTICE RIGHTS COALITION NEWSLETTER

VOLUME I, NUMBER 10 SEPTEMBER, 1984

EDITORIAL

This issue of the "CPRC Newsletter" is devoted to happenings involving the State Board of Chiropractic Examiners and many Doctors of Chiropractic.

As you read this issue please note the underlying message....the degregation of D.C.'s in California. In the past, we looked to the Board for leadership, protection, and help in our fight against organized medicine. Now, it seems our worst enemy is that very same Board.

Many doctors have said they too have had unbelievable experiences with the Board and particularly its Executive Director but were afraid to say anything for fear of reprisal or retaliation.

If you have had an experience or are presently in the thros of Board harassment, let us know--maybe we can guide you and help you to win. CPRC will always protect the doctor and never reveal your name unless you approve.

A famous statesman once said: "If we don't hang together, we'll surely hang separately."

HANG IN THERE!

BOARD ACTS TO REMOVE INSULTING REGULATION--HOEFLING OBJECTS

At the State Board meeting of August 23, 1984, acting under the competent direction of member Dr. Raymond Ursillo, the Board moved to drop Rule 309.

Rule 309 requires any D.C. whose license is suspended or revoked for any length of time, to notify, in writing, every patient under treatment that the doctor's license has been suspended or revoked by the Board. Additionally, a large sign, prepared by the Board, must be posted in a conspicuous place in the doctor's office. The sign is to remain for the entire time of the suspension or revocation.

Dr. Ursillo commented, "Many doctors have complained about this regulation. I find this regulation masochistic and unconscionable."

However, Mr. Hoefling objected, stating the Attorney General would not like this action and would object that these disciplinary guidelines would not be adhered to.

The CPRC respectfully suggests that this Board employee read Sections 1,2,3,&4 of the Chiropractic Initiative Act. The Board controls the actions over D.C.'s, not the Attorney General.

STATE BOARD DIRECTOR CONTINUES TO DESTROY DOCTORS ?

In still another arrogant attempt to hurt, harass, and destroy a California Doctor of Chiropractic, the State Board's Executive Director has ordered a hearing on Dr. David Jackson of Downey.

His crime? Successfully suing a patient who owed the doctor money on an unpaid balance for professional services. The doctor sued this patient in Small Claims Court and won. The patient, as was his right, appealed to the Superior Court. The Superior Court Judge

agreed and ordered the patient to pay Dr. Jackson. The Court ordered also the payments to be no less that $50 per month.

The patient then complained to Mr. Hoefling of the State Board. Immediately knowing that the two courts and judges were wrong and the Board's Director has inherent superior knowledge, it was reported that unprofessional conduct charges (Rule 317) are under consideration.

To add to Dr. Jackson's problems, his twenty-year-old daughter has been in a hospital in a coma for three months--the result of an automobile accident.

* * * *

In still another case, the Board's Executive Director has apparently decided to try to destroy a new doctor. This time the Director is helping an insurance company avoid paying on a claim.

Dr. Duane Eyre of Rancho Cucamonga, CA. treated two children (and the chidren's mother and grandmother) injured in an auto accident. The mother is pleased with the treatment and recently stated she was very satisfied as was the grandmother.

Faced with patient satisfaction and another non-medical, chiropractic treatment success, the insurance company would have to pay the claim. However, there is a way to avoid payment: complain to the Chiropractic Board and the Executive Director will supervise "unprofessional conduct" charges against the doctor.

The "accusation" has been filed and the Attorney General's office has offered a "deal" if the doctor will plead guilty: 1. Revoke his license for 5 years; 2. Suspend all but 30 days (meaning 30 days license suspension and 4 years and 11 months supervised probation); 3. Pay a "costs" charge of $1,558.

With a friend like the Executive Director, it won't be long until no insurance company has to pay a D.C. at all!

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CPRC NEWSLETTER NEEDS YOUR HELP. SEND IN YOUR CONTRIBUTION TODAY SO WE CAN CONTINUE OUR FIGHT FOR CHIROPRACTIC PRACTICE RIGHTS.

* * *

BOARD "STONEWALLS" INVESTIGATION OF RECENT EXAMINATION FIASCO

At the August 23, 1984, public meeting of the Chiropractic Board, prior to calling the meeting to order, Chairperson Dale Hagey, the non-chiropractor member, gave an opening statement of policy.

He took notice of the inappropriately high failure rate of the May, 1984, examination. (ED.--Of the 749 taking the exam 533 failed and will have to retake the exam) Mr. Hagey stated that a modest adjustment would be made on the physical therapy section of the exam. Students would be notified regarding the rescoring in two weeks.

Contrary to previous policy of allowing students to appeal within thirty days of taking the Board, Mr. Hagey stated this would no longer be permitted. He asked those present not to address this topic during the course of the meeting.

Consequently, attorney for 338 of those applicants, college presidents, professors, doctors, students were forced to object after the meeting was adjourned!

These actions, including the abrupt, unexpected, and possibly illegal adjournment by the non-chiropractor Mr. Hagey, are certainly representative of a classical "stonewalling" approach to all problems.

STATE BOARD DIRECTOR MAKES OBTAINING DUPLICATE LICENSE DIFFICULT

In the continuing story of harassment of Doctors of Chiropractic, another chapter was recently written on a Dr. Moore.

It seems this doctor completed the necessary forms provided by the Board and paid the fee for a duplicate license. At a Board meeting, the motion approving the duplicate license was not seconded and thus failed.

Worried because the doctor was unsure of his legal status, he desperately called the Board's Sacramento office. The office of the Board's Executive Director replied that they had received so many phone calls

due to the recent examination fiasco that the office would not answer him on the phone. The doctor was instructed to appear, in person, at the August 23, 1984 meeting to plead his case.

The thunder-struck Board members immediately rectified the error and directed that a duplicate license be issued forthwith.

Our question revolves around the unnecessary action by the Executive Director's Office to make the doctor appear in person when a written request has previously sufficed. Was it an error in judgment? Was it an overt act of harassment? Was it an ego trip? Only the Board's Executive Director can answer.

BOARD'S ATTEMPT TO SILENCE DR. JEREMY SIGMOND FAILS

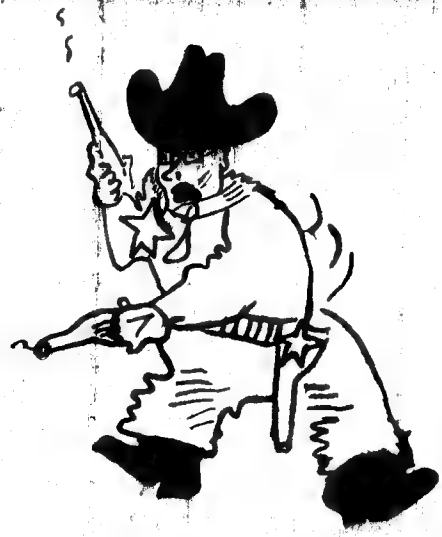
Most California Doctors of Chiropractic have received letters from Dr. Jeremy Sigmond regarding his lawsuit against many parties. Several doctors, including a State Board member, the CCA, and insurance companies were named in the suit. The suit, which deals with arbitrary, unfair, unlawful peer review practices and criminal racketeering forbidden under the Ricoh Act, has not come to trial as yet.

Members of the profession who were directly affected by similar circumstances were supportive of Dr. Sigmond, others filed separate suits.

In an unprecedented action, the Chiropractic Board recently attempted to silence Dr. Sigmond by bringing charges of possible mental incompetence. The Board's Executive Director filed an action requiring the doctor to appear for a competency hearing before a psychiatrist. One of the complaining witnesses was the Board member against whom Dr. Sigmond had filed suit.

After a hearing in Superior Court, an injunction was obtained prohibiting the Board from ever again trying to take such action against Dr. Sigmond. The Board, of course, is now liable for Dr. Sigmond's legal expenses.

How long must the profession put up with this type of action? Will the apathy continue until we are all affected? Perhaps a letter to the Governor and/or the CCA might be in order.



THE STATE BOARD--WHO ARE THEY?

The members of the Chiropactic State Board are appointed by the Governor for terms not to exceed four years but limited to no more that two terms.

Section 1 of the Chiropractic Initiative Act mandates a seven-member Board, five to be Doctors of Chiropractic and two as laypeople representing the consumer. No more than two members can be from the same county. No more than two of the D.C.'s can be from the same chiropractic school. The members are paid a per diem allowance, (which is set by a state agency) and all reasonable expenses.

Within the powers of the Board is the right to hire employees, lawyers, examination commissioners, investigators, and such other personnel as required to assure adequate functioning of the Board.

Edward J. Hoefling, the current Executive Director--a position somewhat analogous to an office manager--is a carreer employee of the State. His principle employer is the State of California, Department of Consumer Affairs. One might consider him on loan to the Board and paid by the Board. The State Board of Chiropractic Examiners hired Mr. Hoefling and they can fire him--as with any other employee.

INSURANCE COMPANIES ARE FIRST; PATIENTS AND D.C.'S ARE LAST !!?

The Board of Chiropractic Examiners has seemingly developed a pattern of siding with the insurance companies and against the interests of the doctor's patients. A consistent pattern seems to appear in many of the Board's accusations.

For example, insurance companies, NOT the patients, complain of "excessive treatment." This immediately raises a question of motive. Is it possible that the insurance companies have found in the Board a willing ally to help avoid paying the claim according to the insured's contract?

We ask,"Why should the Board be incurring extra time and expense doing 'dirty work' for insurance companies?" Would not a more honest approach demand that only complaints from the patient deserve response by the Board's Executive Director? Let the insurance company refuse to pay on its own initiative and face a possible civil suit by the patient. On reflection, this previous sentence may be the answer.

Just what is "excessive treatment" and the resultant charge of "unprofessional conduct" (Rule 317)? If the health of the patient is the primary concern of all--Board, Doctor, insurance company, and Executive Director--then the patient's health care needs are considered first. This interest should be manifest whether the patient needs 5 or 150 treatments to effect the proper care. If the patient's health is not the primary concern, then what the insurance carrier wants shall continue to dominate.

"Excessive treatment" is treatment continued long after the patient is well; or to render diagnostic or laboratory examinations where they are not indicated. The idea of this definition relates to the patient's health needs--not to the claim's payment wishes of an insurance company.

One additional common thought seem to pervade these Board actions--the more investigations, the more Consumer Affairs investigators are needed. The more accusations filed, the more Deputy Attorneys General are needed. Thus, the Board's Executive Director, a career bureaucrat, can assure many other bureaucrats will enjoy full employment. Perhaps we can see a short lesson here: "How To Assure Employment and Become a Hero!"....at our expense.

LASW SOCIETY INVITES BOARD DIRECTOR EDWARD HOEFLING TO SEPT 18TH MEETING

In a clean demonstration of fairness, the LASW Society has arranged for the State Board's Executive Director, Edward J. Hoefling, to appear at their general meeting on Tuesday, September 18, 1984, at 7:30 P.M. The Society meets at the Holiday Inn, 21333 Hawthorne Blvd.; Torrance, CA.

Although the LASW Society has been highly critical of Mr. Hoefling's actions, they want to be as fair as possible and give him an opportunity to present his views.

To keep questions in an orderly manner, a special form will be available at the meeting. This will allow the questions to be asked and the person asking can remain anonymous if they prefer.

Dr. Jerome Klemer, Board Member, will be present to assist Mr. Hoefling.

Since this dinner meeting (cost $14 or $3 w/o dinner) will be heavily attended, admittance will be by reservation only. Call LASW Director Dr. Ransom L. Sare at (213) 370-6323 by September 7, 1984 to make reservations.

BOARD HAS THE POWER TO ACT

Section 4 of the Chiropractic Initiative Act gives the individuals appointed by the Governor to serve as Board Members virtually absolute power over the actions of Doctors of Chiropractic. The Act spells out in adequate detail what powers and duties are the legal requirement of the Board.

There are two other areas of Board action--implied rather than mandated. First, there is a moral obligation to fair play, honesty, and truth. Second, the obligation to observe the actions, motions, policies, and general resolutions--as evidenced by the Board's minutes--of previous Boards. This is the only manner in which continuity can prevail.

To apply this in a specific area let us "pick on" obstetrics. Several previous Boards, dating back into the late 1920's and continuing through the 1950's, repeatedly endorsed the practice of Chiropractic Obstetrics. To this day, licensure by reciprocity is not granted to those doctors from states which do not require obstetrics. In many cases, they must attend an obstetrics course in California Chiropractic Colleges before licensure can be granted.

In the revealing practice survey conducted by the Board in 1980, 72.8% of the California D.C.'s responded by stating that they understood Chiropractic Obstetrics to be part of the scope of practice of Chiropractic.

How did this 72.8% come to this conclusion? 1. Chiropractic Obstetrics was taught in the colleges; 2. A specialty society, approved by the CCA, existed; 3. The State Board repeatedly said Chiropractic Obstetrics is part of the practice of Chiropractic as mandated by the Chiropractic Act.

Since the Board has the absolute power to decide the fate of the D.C.'s, as far as the practice of Chiropractic is concerned, they can accept or reject an "opinion" of the Attorney General's Office (as was clearly evidenced at the Board meeting of August 23, 1984 when Board members rejected an opinion on another matter). One must remember that these "opinions" produced by a minion in the A.G.'s office carry no weight in law. These "opinions" cannot even be referred to in legal proceedings because they are not law, just an "opinion" at that moment in time.

It is interesting to note that when the Board accepted as policy (not a rule or a regulation of law) the Attorney General's opinion on Obstetrics, the members present were threatened and coerced by a then member of the Board. They reacted instead of acting responsibly. If the Board members had not voted to uphold the AG Opinion against childbirthing by Chiropractors, there would be no case against Dr. Laura Flores.

A simple motion to recind this policy statement could remove a much resented action, greatly aid Dr. Flores to win her case for Obstetrics by Chiropractors, and help restore faith in the present Board.

LETTERS TO CPRC

CPRC receives many letters (we could use more donations) but this "from the heart" letter caught everyone's eye and is printed here for your enjoyment:

Dear CPRC Newsletter,

Please accept this small contribution enclosed. I am a student trying to make it on a student's budget, but I felt compelled to make my feelings known in some small way.

Until I noticed CPRC, I had grudgingly resigned myself to the "Sid Williams Chiro-Shop-o-Rama" type magazines. I was greatly warmed to know that people like you at CPRC were out there somewhere.

I only wish I could give more at this time. But as long as our mutual goals are one, I can be "re-inspired" to pursue my career and share with you dear friends any future rewards that it may reap!

Respectfully yours,

(Name withheld)

WE NEED YOUR HELP!!!

CPRC Newsletter is dedicated to preserving Chiropractic practice rights. If our professional organizations would undertake this responsibility, there would be no reason for us to continue.

Meanwhile, we need your help to continue our efforts to inform the profession about what is going on and to offer assistance and moral support to those doctors who are courageous enough to fight back.

SEND IN YOUR CONTRIBUTION TODAY!

TO CPRC NEWSLETTER
P.O.BOX 11794
VENICE, CALIF.90291-9960

YES, YOU CAN COUNT ON ME TO HELP.
I AM ENCLOSING $_____

NAME_____

ADDRESS_____

QUESTIONS AND ANSWERS

Why is it that the Osteopathic profession does not draw as much fire from the scientific community when they talk about Osteopathic manipulation and adjustments as does the Chiropractic profession when it speaks about the Chiropractic adjustment.

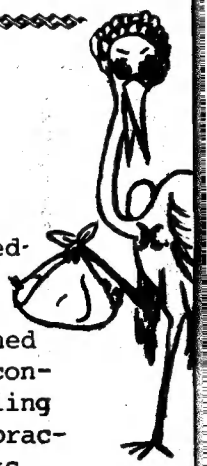
ANS. - Is it possible that the chiropractic adjustment is presented as a cureall? This is contrary to the Osteopathic presentation of the osteopathic manipulation and adjustment along with other procedures as the practice of Osteopathy. This presentation is more acceptable to the scientific community - as the scientific community does not accept a single technique or procedure as a panacea.

How can the entire Chiropractic profession be brought under one umbrella?

ANS. - To define the art, science and philosophy of Chiropractic as the chiropractic adjustment only, excludes all of those chiropractors who employ othe natural methods as well as the adjustment. If Chiropractic is defined as a system of Physiological Therapeutics and the diagnosis and analysis of the sick and afflicted, this would, of course, include those who wish to limit their practice to a specialty of any adjustive techniques as well as those who employ other natural methods. In definations - the greater includes the lesser. The lesser does not include the greater.

What does the M.D., the D.O., and the D.C. have in common as compared to paraprofessionals.

ANS. - The D.C., D.O., and M.D. are REQUIRED to have two years of preprofessional training in the basic sciences and four years of professional traininh which includes advanced training in the basic sciences as well as the fundamental principles of therapeutics and diagnosis. Paraprofessionals, generally speaking, enter their schools with a high school diploma and are taught the techniques of their particular field. I.e., Physical Therapists receive detailed training in the use of hydro, electro, mechano, etc. procedures as ordered by the general practitioner. The training of the general practitioner stresses fundamental principles in order to give the doctor the required understanding of when to use specific diagnostic and therapeutic procedures.



UPDATE ON DR. LAURA FLORES

Although the next court hearing is scheduled for September 18, 1984, Theodora Poloynis-Engen, attorney on the Flores Case, has said the case must be postponed to November. She will be requesting a continuance due to her busy schedule handling a number of cases for Doctors of Chiropractic and because of court date conflicts.

CHIROPRACTIC PRACTICE RIGHTS COALITION
POST OFFICE BOX 11794
VENICE, CALIFORNIA 90291-8860

Dr. Glen C. Miller
P.O. Box 14487
So. Lake Tahoe,Ca95702

DATED MATERIAL NEEDS ACTION NOW!!

Chiropractic health care is the logical alternative to allopathic care. Our thinking and philosophy coincide with the renaissance that is bursting forth all around us. We are in the eye of this holistic hurricane and we must muster the parameters and embrace the challenge.

We must strengthen the image of the profession by insisting that the schools teach all the subjects mandated in the Chiropractic Act - not only in a didactic recitation from the text, but in a clinical and practical manner. Anything else is a violation of sections 4(g), 5 and 6(c) of our ACT.

It's the Chiropractic State Board's job to see that the schools measure up to the task. If the Board winks at this part of their duty, they can be cited for malfeasance of office.

Only by following the law will the schools turn out properly trained Chiropractic Physicians...we must treat the entire patient - not just a back and a neck - Lest you forget, there are hearts, lungs, bellies and other points of interest that require the attention of us as primary health care providers.

We must urge the State Board to see that all the schools move into the 80s and teach the full gamut of physiological therapeutics as described by our law. We must offer a true and complete alternative to the consumer within the chiropractic profession.

The public is calling for the multidimentional drugless and knifeless physician of old. We cannot allow this one to slip away

Circumstances offer us a challenge, if we do not pick up this gauntlet, it can only demean our vision, and make our purpose ignoble.

Let's think of ourselves as chiropractic physicians because, in fact, we are!

PENNSYLVANIA 6-5000 WITH APOLOGIES TO GLENN MILLER, CHIROPRACTIC ACT 650 OH! OH!

by George Weiner, D.C.

Recently, the I.C.A.C. Journal (that's the International Chiropractic Association of California) printed a full page item entitled, "POTENTIAL VIOLATIONS...BEWARE!", in which article was a three quarter page reproduction alleged to be from the State Bd. of Chiropractic Examiners and signed by that board's Executive Director, Edward J. Hoefling.

This brief article, while unsigned, was apparently written by the I.C.A.C. President, Carole Y. Wright, D.C., as one sentence of the article states:

> The correspondence was mailed to me as president of the ICAC, and I followed up on it.

Apparently, a bed manufacturer has offered doctors of chiropractic an "incentive" for referring their patients to this company. Subsequently, the Board, with its Executive Director at the helm, took action in the way of a strong letter, which states in pertinent part:

> Such an offer is in violation of Section 650 of the Chiropractic Act.

The article, in supporting this letter, states:

> Mr. Hoefling's letter is self explanatory, and we wanted the profession to know that this type of arrangement is in violation of Section 650 of the Chiropractic Act.

While this author agrees with the intendment of the article, to wit: the use of a doctor of chiropractic as a capper or steerer is, in fact, unprofessional; the fact remains, and therefore must be pointed out, the that THERE IS NO SECTION 650 OF THE CHIROPRACTIC ACT.

The Chiropractic Act, or the Chiropractic Initiative, or General Law 4811 as it is correctlytitled, has only twenty sections (i.e.-Sections 1 to 20) and never had a Section 650 from its inception (Statutes and Amendments to the Constitution, 1923, lxxxiii).

Most unfortunate, of course, is the fact that the State Board of Chiropractic Examiners would condone the sending of a letter with a blatant error such as this. The mere idea of any board that is the controlling agency, appointed by the governor, of a statute, and that agency not acknowledging the precise correctness of the statute which they are sworn to uphold, is unconscienable. The United States Supreme Court has discussed relative actions in their opinion in Milwaukee and St. P.R. Co. v. Arms, 91 U.S. 494.

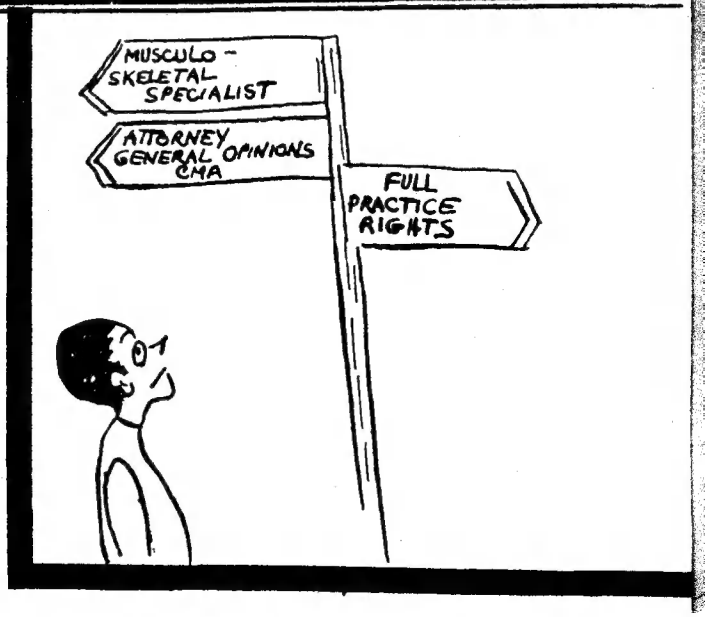
Of equal importance, is the fact that a president of a large, state-wide chiropractic organization would say, "...and I followed up on it." How can someone follow up on something that is non-existent and come to a conclusion?

But, the problem here runs deeper than a head-nodding consent of an obvious error. When people who are supposed to possess that degree of knowledge and wisdom, by holding themselves out as experts (with such titles as Executive Director, member of the Board, President of the ICAC, etc.) in the field of chiropractic, misuse that responsibility, either through ignorance or neglect, then they are causing the entire profession to practice under an act that is being interpreted ambiguously.

The California Supreme Court has ruled that right to practice is a property right (Hewett v. State Bd. of Medical Examiners, 148 C. 590,592). And, therefore, any right to practice cannot be taken away without due process (Jacobsen v. Bd. of Chiropractic Examiners, 169 C.A.2d 389,390,393,394) (LeStrange v. City of Berkeley, 210 C.A.2d 313-315,319,321,325,326,328). The latter Court said, on pge 325:"Due process requires a fair trial before an impartial tribunal. Such a trial requires that the person or body who decides the case must (emphasis added) know, consider and appraise the evidence."

So, the question is, if they don't even know how the Chiropractic Act is numbered, how can the practicing doctor, in the field, get a fair and impartial trial?

The answer, of course, is, he can't. And that, doctor, is a denial of due process, which is a violation of the Fourteenth Amendment of the Constitution.



NEW APPOINTMENTS TO THE BOARD
WHAT DOES IT MEAN?

With Governor Deukmejian's recent appointment of Drs John Hemauer, Dennis McGown, Lee Kaufman to the Chiropractic Board, an opportunity for significant and positive change presents itself.

The question is will these members act responsibly to bring about some badly needed changes? Or will they be self-serving and forget that it is incumbent upon them to see that all practitioners are represented, not just the musculo-skeletal variety, as mandated by section 16 of the Chiropractic Act? Or will the Board continue to be unduly concerned with peer review activities restricting the number of treatments for given conditions and limiting the conditions a doctor can treat to subluxations. It goes without saying, the profession is fed up with unfair accusations and administrative hearings without sufficient justification . In too many instances, it appears that the Board sides with insurance adjusters against the doctor.

It is a matter of grave concern that virtually all of the Board members have served as experts in Workman's Compensation and consultants for the insurance industry. There is real danger that the straight and narrow view of chiropractic by the insurance industry could set the standard and limit the practice of chiropractic . It is no secret, CCA legislative plans for 1985 focus on insurance issues that might restrict chiropractic in an indirect way.